

**GOVERNOR'S OFFICE OF EMERGENCY SERVICES  
CRIMINAL JUSTICE PROGRAMS DIVISION**

**VERTICAL PROSECUTION BLOCK PROGRAM  
REQUEST FOR APPLICATION**



**May 2004**

**GOVERNOR’S OFFICE OF EMERGENCY SERVICES  
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- A. Waiver of FY 2004/05 Vertical Prosecution Block Program Funding
- B. 2004/05 County Allocation

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**PART I – INFORMATION**

**A. INTRODUCTION**

This Request for Application (RFA) provides all of the information and forms necessary to prepare an application for the Governor's Office of Emergency Services (OES) grant funds. The terms and conditions described in this RFA supersede all previous RFAs and any conflicting provisions stated in the OES *Grantee Handbook*. However, the *Grantee Handbook* provides helpful information you may wish to consult while developing your application. A copy can be obtained from website, [www.oes.ca.gov](http://www.oes.ca.gov). Applicant can select "Plans and Publications, RFA/RFP Grantee Handbook" to access the *Grantee Handbook*.

**B. CONTACT INFORMATION**

Name:	Linda Orozco	Name:	Robert Molden
Telephone #:	(916) 327-3689	Telephone #:	(916) 322-2988
Fax:	(916) 324-9179	Fax:	(916) 324-9179
Email:	<a href="mailto:linda.orozco@oes.ca.gov">linda.orozco@oes.ca.gov</a>	Email:	<a href="mailto:robert.molden@oes.ca.gov">robert.molden@oes.ca.gov</a>

Questions concerning this RFA, the application process, or programmatic issues should be submitted to the above contact persons by telephone, fax or e-mail.

**C. APPLICATION DUE DATE**

To submit an application, applicant must deliver the application to OES **by 5:00 p.m.** on the due date, or mail the proposal postmarked by the due date.

**The Due Date Is: Friday, June 4, 2004.**

Applicant must submit **one original and one copy** of the application to:

Governor's Office of Emergency Services  
Criminal Justice Programs Division  
P.O. Box 419047  
Rancho Cordova, CA 95741-9047  
Attn: Vertical Prosecution Block Program – Drug Enforcement Section

**OR**

If sending application by **overnight delivery**, submit to:

Governor's Office of Emergency Services  
Criminal Justice Programs Division  
3650 Schriever Avenue  
Mather, CA 95655  
Attn: Vertical Prosecution Block Program – Drug Enforcement Section

If the application will be **hand-delivered**, it should be delivered to the Governor's Office of Emergency Services at 1130 K Street, Suite 300, Sacramento. Please note the following: 1130 K Street is located at the southwest corner of the intersection of 12th and K Streets. A Bank of America is located on the first floor of this building. Please note that K Street is a pedestrian mall. Indoor parking structures are located on the east side of 12th Street between K and L Streets (connected to the Hyatt Regency Hotel), and on 10th Street between K and L Streets. Street parking is limited and requires quarters for parking meters. Once you enter the building at 1130 K Street, take the elevator to the third floor and proceed straight down the hall to the Receptionist Office behind the double wooden doors labeled "State of California: Governor's Office of Emergency Services." The application will be date stamped and you may request a receipt.

#### **D. ELIGIBILITY**

To be eligible for funding for the Vertical Prosecution Block (VB) Program, the applicant must be a county district attorney office in California. Counties opting to decline Fiscal Year (FY) 2004/05 VB Program funds **MUST** return the Waiver of 2004/05 VB Program funding form included in Appendix A of this RFA. Grantees desiring to submit late applications **MUST** provide a written request for an extension no later than thirty days after the application due date indicated above. OES reserves the right to reallocate funds of grantee agencies that fail to obtain a written extension within the thirty-day grace period.

#### **E. FUNDING CYCLE AND DURATION**

##### **1. Grant Award Period**

This will be a twelve-month grant, beginning July 1, 2004, and ending June 30, 2005. Thereafter, continuation funding is contingent on the enactment of the State Budget Act and satisfactory performance in meeting the program intent.

##### **2. Funding Levels**

OES anticipates \$8,176,000 will be available from the State General Fund for the Vertical Prosecution Block Program. The funding allocation plan is based upon the statewide intent of the program to provide each California County a core amount sufficient to implement a minimum of one VB Program Component. See Appendix B for each county's funding allocation.

#### **F. VERTICAL PROSECUTION BLOCK PROGRAM INFORMATION**

##### **1. Background and Purpose**

The California State Budget Act of 2003/04 combined the five Vertical Prosecution Block Programs administered through OES into one VB Program with five designated components. Each component is consistent with one of the five combined programs: Child Abuser Vertical Prosecution (CAVP) Program; Statutory Rape Vertical Prosecution (SRVP) Program; Elder Abuse Vertical Prosecution (EAVP) Program; Major Narcotic Vendor Prosecution (MNVP) Program; and Career Criminal Prosecution (CCP) Program. In order to receive funding under the new VB Program, counties must choose to prosecute crimes defined within one or more of the five program components.

## **2. Vertical Prosecution Overview**

Vertical prosecution is a proven program model, which involves the use of highly experienced and skilled prosecutors who prosecute a reduced caseload of specific types of serious criminal cases from the filing of the case through sentencing. As resources allow, it is recommended a vertical prosecution team consist of a prosecutor, experienced investigator, and an advocate working in conjunction with each other.

## **3. Administrative Authority**

The California State Budget Act of 2003/04 initially authorized the VB Program. Within the VB Program individual components are governed by legislative mandates as summarized below:

### **a. CAVP Program**

The CAVP Program was authorized by Assembly Bill (AB) 33 (Chapter 1097 of the Statutes of 1985). The current statute is reflected in Title VI, Part 2 of the California Penal Code (PC), Chapter 2.4, Sections (§§) 999q to 999y. Legislation was chaptered August 31, 2001 (AB 929) expanding the scope of the CAVP Program to include all types of abuse, not just sexual.

### **b. EAVP Program**

Prior to being folded into the VB Program, the EAVP Program was established as a stand-alone program by the California State Budget Act of 1999/00. The crimes acceptable for prosecution under the EAVP Program are defined in California PC §368.

### **c. MNVP Program**

Senate Bill (SB) 1982, (Chapter 1424, Statutes of 1984) added Chapter 9 to Title 6, Part 4, of the California Penal Code. Chapter 9, titled California MNVP Law, was effective September 26, 1984. The Chapter was amended by AB 2313, (Chapter 306, Statutes of 1987), to recognize the need to financially assist small counties (under 200,000 population) in meeting the criminal justice needs associated with the production, distribution and sale of illegal drugs.

Chapter 9 includes Health and Safety (H&S) Code §§13880 to 13884. The Legislature declared that the production and sale of narcotics is a consistent problem in California. It stated that substantial and disproportionate amounts of serious crime are associated with the cultivation, processing, manufacturing and sale of narcotics. The law was established to "support intensified efforts by district attorneys' offices to prosecute drug producers and sellers through organizational and operational techniques that have been proven effective..."

### **d. CCP Program**

In 1977, the Governor of California signed into law Chapter 1151, Statutes of 1977, establishing the CCP Program in accordance with PC §§999b to 999h.

**e. SRVP Program**

Prior to being folded into the VB Program, the SRVP Program was established as a stand-alone program by the California State Budget Act of 1996/97. The crimes acceptable for prosecution under the SRVP Program are defined in California PC §261.5.

**4. VB Program Requirements**

**a. Vertical Prosecution**

The project will perform vertical prosecution, whereby the prosecutor (or unit) who makes the initial filing or appearance in a case accepted by the vertical prosecution unit, makes all subsequent court appearances on that particular case through its conclusion, including sentencing.

To allow for the realities of case management such as scheduling conflicts, illness and extraordinary events, OES recognizes three degrees of vertical prosecution as follows:

- True Vertical Prosecution: The same prosecutor filed the charges, or made the first appearance, after the crime was identified as a project appropriate offense, and made all subsequent court appearances through the sentencing stage.
- Major Stage Vertical Prosecution: The same prosecutor that filed the charges, or made the first appearance, after the crime was identified as a project appropriate offense, makes all subsequent major appearances through the sentencing stage. Major stages include: preliminary hearing; trial; sentencing; and all significant appearances, such as contested motions affecting bail; admissibility of evidence; dismissal of charges; change of venue; motions to sever or consolidate; discovery; set-aside the verdict; or motions concerning search warrants.
- Unit Vertical Prosecution: Based upon extraordinary circumstances such as: court conflicts; scheduling conflicts requiring appearances at two (2) or more places at one time; geographic location of hearing; illness; or absence due to unavoidable circumstances; the principal prosecutor (prosecutor who filed the charges, or made the first appearance, after the crime was identified as a project appropriate offense) is assisted by no more than one other unit attorney. A back-up attorney may be designated for the grant award period.

**b. Highly Qualified Prosecutors and Investigators**

The assignment of highly qualified prosecutors and investigators to vertical prosecution cases:

The Legislature has defined “highly qualified” as persons with at least one year of experience in the prosecution, or as appropriate, investigation of felonies, or those who have been selected to receive specified training, or individuals who have attended equivalent training approved by OES.

OES requires projects to establish a personnel rotational policy for vertical prosecution staff, which demonstrates a commitment to stability and continuity of staff assignments. OES further requires vertical prosecution staff be assigned exclusively to a minimum one of the five program components. Positions may be split funded with



duties other than one of the five program component areas, only when grant funds are insufficient to support full-time staff positions.

**c. Reduction in Caseload**

A significant reduction in caseload for prosecutors and investigators assigned to vertical prosecution cases:

OES requires each funded District Attorney's Office develop a written policy regarding appropriate caseload level for prosecutors and investigators assigned to a vertical prosecution unit. This policy must address the caseload level, a caseload comparison between vertical prosecution unit prosecutors and investigators, and felony non-unit prosecutors and investigators, as well as how cases beyond established levels will be prosecuted.

**d. Policies for Vertical Prosecution Units**

Each District Attorney's Office establishing a vertical prosecution unit(s) and receiving state support under this chapter, shall adopt and pursue the following policies:

- 1) All reasonable prosecutorial efforts will be made to resist the pretrial release of a charged defendant meeting program priority selection criteria.
- 2) Nothing in this chapter shall be construed to limit the application of diversion programs authorized by law. All reasonable efforts shall be made to utilize diversion alternatives in appropriate cases.
- 3) All reasonable prosecutorial efforts will be made to reduce the time between arrest and disposition of charges against an individual meeting program priority criteria.

OES requires all policies developed in conjunction with the foregoing principles be in writing and available to unit staff and OES. These policies should be reviewed periodically to ensure they reflect current concepts and applicability. The existence and evaluation of the current written policy regarding the foregoing will be considered when determining compliance with these objectives.

**G. VERTICAL PROSECUTION COMPONENT SPECIFIC REQUIREMENTS**

**1. CAVP Component**

The CAVP Program was authorized by AB 33 (Chapter 1097 of the Statutes of 1985). The current statute is reflected in Title VI, Part 2 of the California Penal Code, Chapter 2.4, §§999q through 999y. Legislation was chaptered August 31, 2001 (AB 929) expanding the scope of the CAVP Program to include all types of abuse, not just sexual.

Each District Attorney's Office establishing a CAVP unit shall concentrate prosecution efforts and resources upon individuals identified under selection criteria set forth in PC §999t.

**a. Subjects of CAVP Efforts (PC §999t)**

An individual is subject to prosecution under PC §999t, subdivision (a), if he/she is charged with felony assault of a child under the age of 18 years, and is being prosecuted for one or more of the following violations:

- the sexual abuse of a child as defined in PC §11165 *et seq.*;
- endangering a child or causing or permitting a child to suffer physical pain, mental suffering, or injury as defined in PC §273a, subdivision (a) and (b);
- assault resulting in death of a child under eight years of age as defined in PC §273ab;
- infliction of corporal punishment or injury on a child resulting in traumatic condition as defined in PC §273d; or
- sending harmful matter to a minor by telephone messages, electronic mail, Internet or commercial online service as defined in PC §288.2 when committed in conjunction with any other violation listed above.

The CAVP Advisory Group recommended additional charges to fulfill the intent of the CAVP Program. These charges included assault with intent to rape (PC §220), sexual battery (PC §243.4), aggravated assault on a child (PC §269), and violation of probation.

In applying the child abuser selection criteria set forth above:

- 1) A district attorney may elect to limit child abuser prosecution efforts to persons arrested for any one or more of the offenses described in subdivision (a) if crime statistics demonstrate that the incidence of one or more offenses presents a particularly serious problem in the county;
- 2) A district attorney shall not reject cases for filing exclusively on the basis that there is a family or personal relationship between the victim and the alleged offender.

**b. Prosecution Discretion (PC §999v)**

In exercising the prosecutorial discretion granted by PC §999v, the District Attorney shall consider the character, the background, and the prior criminal background of the defendant.

**c. Coordination**

Coordination, referral, and training with local community agencies providing services to victims of crime, such as rape counseling and child abuse programs are required for CAVP units. CAVP units are legislatively required to participate and hold membership in local task forces established to improve communication between criminal justice and community service agencies. Projects choosing this component must inform OES if their county has a protocol for the investigation of child abuse and neglect cases, and if not, when they anticipate the protocol be completed.

**d. Departure from Selection Criteria Under Extraordinary Circumstances (PC §999v)**

The selection criteria set forth in PC §999t shall be adhered to for each child abuser case unless, in the reasonable exercise of the prosecutor's discretion, extraordinary circumstances require departure from such policies in order to promote the general purposes and intent of this chapter.

**2. CCP Component**

The goal of the CCP component is to support increased efforts by District Attorney's Offices to prosecute career criminals through organizational and operational techniques that have been proven to be effective. The current statutes are reflected in PC §§999b through 999g.

**a. Subjects of CCP Efforts**

Persons subject to career criminal prosecution efforts are defined in PC §999e as individuals under arrest for the commission or attempted commission of one or more of the following felonies:

- robbery;
- burglary;
- arson;
- any unlawful act relating to controlled substances in violation of H&S Code §§11351, 11351.5, 11352, or 11378;
- receiving stolen property;
- grand theft;
- grand theft auto;
- lewd or lascivious conduct upon a child;
- carjacking;
- murder;
- manslaughter;
- rape;
- sexual assault;
- child molestation;
- assault with a firearm;
- discharging a firearm into an inhabited structure or vehicle; or
- owning, possessing or having custody or control of a firearm; as specified in subdivisions (A) and (B) of §12021; and who is either being prosecuted for three or more separate offenses not arising out of the same transaction involving one or more of those felonies, or meets the criteria in (1) or (2) below.

The charged individual has at least one conviction during the preceding ten years for any felony listed below:

- robbery of the first degree;
- carjacking;
- burglary of the first degree;
- arson as defined in PC §451;
- unlawfully causing a fire as defined in PC §452;
- forcible rape;

- sodomy or oral copulation committed with force;
- lewd or lascivious conducted committed upon a child;
- kidnapping as defined in PC §§209 or 209.5;
- murder; or
- manslaughter.

The charged individual has a least two convictions during the preceding ten years for any felony listed below:

- grand theft;
- grand theft auto;
- receiving stolen property;
- robbery of the second degree;
- burglary of the second degree;
- kidnapping as defined in PC §207;
- assault with a deadly weapon, or instrument; or
- any unlawful act relating to controlled substances in violation of H&S Code §§11351 or 11352.

The ten-year period specified above should be exclusive of any time, which the arrested person has served in state prison.

In applying the career criminal selection criteria set forth above:

A district attorney may elect to limit career criminal prosecution efforts to persons arrested for any one or more of the felonies listed in subdivision (a) of this section if crime statistics demonstrate that the incidence of one or more of these felonies presents a particularly serious problem in the county.

**b. Prosecution Discretion [PC §999(e)]**

In exercising the prosecutorial discretion granted by §999g, the District Attorney shall consider the character, background, and prior criminal background of the defendant, and the number and the seriousness of the offenses currently charged against the defendant.

**c. Departure from Selection Criteria Under Extraordinary Circumstances (PC §999g)**

The selection criteria set forth in §999e shall be adhered to for each career criminal case unless, in the reasonable exercise of the prosecutor's discretion, extraordinary circumstances require the departure from such policies in order to promote the general purposes and intent of this chapter.

**3. EAVP Component**

The purpose of the EAVP component is to enhance or create specialized units to handle serious crimes against elderly and dependent adults, as defined in the Elder Abuse Statute, PC §368 and related statutes. Projects may fund part-time or full-time qualified deputy district attorneys and district attorney investigators to support this component purpose. Projects may also fully or partially fund positions contracted from other related agencies, such as Adult Protective Services.

This component emphasizes the vertical prosecution of all cases of elder and dependent adult victimization. Vertical prosecution increases the quality of the case, and results in the victim not having to revisit the pain and suffering as they tell their story to a series of prosecutors; it gives the victim the comfort of knowing whom to call in case of a problem, and also benefits prosecutors as they develop a rapport with, and the trust of, the victim.

**a. Subjects of EAVP Efforts**

PC §368 defines elder abuse as any willful act perpetrated against a person 65 years of age or older, or a dependent adult between the ages of 18 and 64 who has incapacitating physical or mental limitations, in which the elder or dependent adult is subjected to physical pain or mental suffering, or is knowingly permitted to suffer such that his or her person or health is endangered. This includes financial exploitation or fiduciary abuse by a caregiver or person in a position of trust.

The EAVP units receiving funds under this component shall concentrate prosecution efforts and resources on individuals that are accused of serious crimes against the elderly or dependent adults as defined in PC §368 and related statutes. Grant funded prosecutors and investigators must be exclusively assigned to prosecute violations of PC §368 and related statutes.

**b. Coordination**

If the project chooses to prosecute elder abuse and dependent adult cases, they must obtain a current, signed Operational Agreement (OA) with the OES funded Victim/Witness Assistance Program, and if applicable the Special Emphasis/Special Victims Program and the Elder Abuse Advocacy and Outreach Program in their county. The project is also encouraged to seek OAs with other agencies which may provide services focused on elder abuse advocacy and outreach, such as the county Adult Protective Services Agency.

Projects must actively and regularly participate in their city's or county's elder abuse interagency task force. Documentation of participation must be kept by the project; meeting minutes identifying participants is the best method of documentation.

**4. MNVP Component**

The purpose of the MNVP component is to support increased efforts by county district attorney's offices to successfully prosecute and convict major drug offenders who commit serious felony violations of the California H&S and select PC sections, see PC §§13880 through 13884. The purpose is further served by reducing major illegal drug activity by incapacitating offenders through confinement.

**a. Subjects of MNVP Efforts**

An individual may be the subject of the major narcotic vendor prosecution who is under arrest for the commission or attempted commission of one or more felonies relating to controlled substances in violation of §§11351, 11352, 11358, 11378, 11378.5, 11379, 11379.5 or 11383 of the H&S Code.

In applying the major narcotic selection criteria set forth above:

A district attorney may, consistent with the provisions of subdivision (d) of §13881, elect to limit drug prosecution efforts to persons arrested for any one or more of the felonies listed in subdivision (a) if crime statistics demonstrate that the incidence of that felony or felonies presents a particularly serious problem in the county.

**b. Prosecution Discretion**

In exercising the prosecutorial discretion granted by this section, the District Attorney shall consider the character, background, and prior criminal background of the defendant and the number and the seriousness of the offenses currently charged against the defendant.

Projects choosing this component must ensure cases screened and prosecuted must be felonies described in specific sections of the California H&S Code.

All criteria shall be adhered to unless, in the reasonable exercise of the prosecutor's discretion, extraordinary circumstances require the departure from those policies in order to promote the general purposes and intent of this component. This departure then, must be described in writing in locally established policies.

**5. SRVP Component**

The goal of the SRVP Program is to increase vertical prosecution of adults having sexual intercourse with minors. Services are directed toward child victims under the age of 18, and when appropriate, to their families.

The service mandated by the SRVP Program is to vertically prosecute cases of unlawful sexual intercourse as defined under PC §261.5. Vertical prosecution has been shown to improve conviction rates, reduce trauma to victims, and provide more consistent, appropriate sentencing.

**a. Subject of SRVP Efforts**

Cases approved for appropriate filing are: prosecution of statutory rape – unlawful sexual intercourse with a minor; attempted statutory rape; a violation of probation involving a SRVP charge; and/or any activity that constitutes grooming of the victim for an eventual act of unlawful sexual intercourse and sexual assault cases in accord with the intent of halting the exploitation of youth victims. Cases prosecuted under the SRVP Program are not required to involve live or stillborn births, abortions, miscarriages, or pregnancy, although a SRVP project may elect to target these incidents.

Projects may focus resources on cases resulting in the most significant impact on the victim or society, (e.g., statutory rapist/fathers); cases resulting in multiple births; cases involving gang rituals; cases involving acquaintance rape; cases involving minors with physical or mental disability; cases involving prostitution/pimping; and cases involving alcohol or other drugs, including drug-exposed infants.

Cases appropriate for prosecution under the SRVP Program may involve female minors and male adult defendants, same sex minors and defendants, or adult female defendants engaging in unlawful sexual intercourse with minor males.

Investigation is encouraged by District Attorney's Offices to strengthen evidence in support of vertical prosecution of violation of appropriate crimes under the SRVP Program. Projects may budget part-time or full-time highly qualified investigators to provide these services in cases referred to the SRVP project unit.

**b. Prosecution Discretion**

The intent of the SRVP Program is to vertically prosecute adult offenders engaging in unlawful sexual intercourse as defined under PC §261.5. It is not the intent of the SRVP Program to subsidize prosecution of these cases for forcible rape or child molestation cases.

Misdemeanor vertical prosecution by project-funded staff is allowable in addition to, but not in lieu of, vertical prosecution of appropriate felony cases.

SRVP projects may, but are not required to, submit sentencing recommendations to the court that include a range of requirements for the defendant to be held accountable for his or her criminal actions. Examples of sentencing recommendations include, but are not limited to: five year felony probation, incarceration, registration pursuant to PC §290; restitution to be paid to the victim for damages incurred as a result of the crime; restitution to reimburse for counseling, medical, relocation; restitution to the police for the cost of a forensic medical examination; ordering defendant to cooperate with the Family Support Division by admitting paternity, stipulating to a support order, and participating in parenting classes.

**c. Coordination**

Victim services may be provided to minor victims and their families in cases accepted by the SRVP project unit. Projects may budget part-time or full-time victim advocate positions to provide these services to victims in cases prosecuted by SRVP project prosecutors. Such positions must be coordinated with the local Victim/Witness Assistance Center.

SRVP project-funded victim advocate services must support the prosecution effort. If an advocate position is not funded, all victims must be referred to a victim advocate, which includes a victim/witness advocate by definition per PC §679.04, which states all victims have a right to have an advocate and support person present during all stages of the proceedings.

To increase referrals of PC §261.5 cases for filing, projects should establish a collaborative relationship with local law enforcement, which includes a referral system, a system for exchange of information including updates in the law, and technical support for local law enforcement.

Presentations addressing statutory rape incidence and impact, related laws, and local SRVP project services are allowable. The intent of these presentations must be to increase referrals, strengthen service linkages, or reduce public misconceptions for the ultimate purpose of strengthening SRVP prosecution efforts. There are no restrictions on target audiences. Education and prevention programs (i.e., sex education and birth control, etc.) are not allowable.

## **H. PREPARING AN APPLICATION**

For clarity, the forms in Part IV include an Application Cover Sheet. Please complete the Application Cover Sheet and attach it to the front of the application.

The following components are required for a complete application:

- Application Cover Sheet;
- Grant Award Face Sheet signed with original authorized signature (Form A301);
- Certification of Assurance of Compliance signed with original authorized signatures;
- The Project Narrative;
- Project Component Specific Objectives Forms;
- The Budget Narrative and Project Budget (Forms A303a-c); and
- The Application Appendix.



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CRIMINAL JUSTICE PROGRAMS DIVISION**

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REQUEST FOR APPLICATION**

**PART II – INSTRUCTIONS**

The instructions in this section correspond to each of the application components, as well as to the forms provided in Part III.

Applicant must use the forms provided or computer-generated forms, and plain 8½" x 11" white paper for the project narrative sections. If computer-generated forms are used, they must duplicate the OES forms.

Application must be typed with characters no smaller than standard 12-pitch font. **Applicant must double-space all narrative sections of the application.**

Copies of the application must be assembled separately and individually fastened in the upper left corner. **Do not bind applications.**

**A. THE PROJECT NARRATIVE**

The project narrative is the main body of information describing the problem to be addressed, the plan to address that problem through appropriate and achievable objectives and activities, and the ability of the applicant to implement the plan. **If a project is proposing to prosecute cases under more than one priority area, each area must be described separately.**

**1. Problem Statement**

This section addresses the problem and the need for services offered by the Vertical Prosecution Block Program. The following outlines the items which must be addressed in the Problem Statement; this information must be provided in narrative form:

Provide a community profile of the service area which justifies the need for vertical prosecution of one or more of the five program components, describing the following:

**For all projects:**

- the geographic size and location,
- the population size,
- weakness of the current resources that may be enhanced by the project, and
- collaborative efforts in the county to combat the problem.

## **Plus**

### **CAVP:**

- The prevalence of and types of child abuse, including children with disabilities, sexual abuse, physical abuse, neglect, children whose lives are victimized by parental substance abuse, and high tech crimes against children.

### **CCP:**

- Describe the problem of identifying, investigating, and prosecuting career criminals.

### **EAVP:**

- Describe the problem of elder and dependent adult abuse to be addressed by the project; and
- Describe the elder and dependent adult population in the county.

### **MNVP:**

- Describe the problems associated with prosecuting major narcotic vendors in the county, (e.g., cultivation, processing, manufacturing, distribution, trafficking, and sales); and
- Provide statistical information that supports a **significant increase** in major narcotic vendor cases in the county.

### **SRVP:**

- Describe the problem of identifying, investigating and prosecuting crimes of unlawful sexual intercourse with a minor.

## **2. Plan and Implementation**

**Plan:** This section addresses the applicant's plan to prosecute cases in the applicant's service area.

### **a. Enhanced Prosecution**

- Describe the process in which cases are referred to the unit, including the source of referrals.
- Describe the project's strategies to develop linkages to increase the number of cases referred.
- Describe how the applicant will implement vertical prosecution within the unit.
- Describe how the project will ensure all victims are referred to appropriate victim service agencies. All referrals will be initiated in writing within seven days of charging the case, or receiving the case into the unit, whichever comes first.
- Describe how the project will maintain close contact with the victim (or family/guardian).

### **b. Highly Qualified Staff**

- Describe the experience and training of all project staff.

### **c. Average Caseload**

- Provide the average caseload for felony prosecutors and investigators in nonvertical prosecution efforts in 2004.

- Describe how the applicant will calculate the average caseload for project investigators and prosecutors.

#### **d. Mandated Objectives and Activities**

In this section, the applicant should describe and explain the project's plan to address each of the three mandated objectives. For each objective, provide a quantified estimate of the services to be provided (use a whole number only, do not use, for example, "between 5-20"). Also provide a brief overview of the manner in which these objectives will be achieved, including the activities to be performed to support services.

- Be reasonable to achieve within the second year of operation.
- Show sufficient staff to achieve the stated objective and activities.
- Describe the source documentation collected and maintained to measure results.
- Demonstrate proof of successful objective measurement (source documentation is defined as records used to validate project activities and achievements as they pertain to the objectives' outlines, e.g., intake logs, client files, progress notes, attendance rosters, sign-in sheets, etc.).

#### **Objective 1: Cases Accepted**

This objective refers to the number of referred cases, which will be accepted by the unit.

For each program component you choose to implement, provide the number of cases referred and accepted.

The estimated number of cases referred to the unit is \_\_\_\_\_. The estimated number of cases accepted by the unit is \_\_\_\_\_.

Describe the source documentation to be used to collect and report data on each objective. Source documentation may include case files, client contact sheets, telephone logs, progress files and other related documents.

#### **Objective 2: Vertical Prosecution**

This objective refers to the percent of defendants who will be vertically prosecuted by the unit under true vertical prosecution, major stage prosecution, or unit vertical prosecution.

For each program component you choose to implement, provide the percent of defendants who will be vertically prosecuted using the following methods.

Prosecute \_\_\_\_\_% of defendants using True Vertical Prosecution.

Prosecute \_\_\_\_\_% of defendants using Major Stages Vertical Prosecution.

Prosecute \_\_\_\_\_% of defendants using Unit Vertical Prosecution.

Describe the source documentation to be used to collect and report data on each objective. Source documentation may include case files, client contact sheets, telephone logs, progress files and other related documents.

### Objective 3: Average Caseload

This objective refers to the estimated average yearly caseload for investigators and prosecutors.

For each program component you choose to implement, provide the average caseload of vertical and non-vertical prosecutors and investigators.

The estimated average yearly caseload for the investigator is \_\_\_\_\_. The estimated average yearly caseload for the prosecutor is \_\_\_\_\_.

The estimated average yearly caseload for non-vertical prosecution investigators is \_\_\_\_\_. The estimated average yearly caseload for non-vertical prosecution prosecutors is \_\_\_\_\_.

Describe the source documentation to be used to collect and report data on each objective. Source documentation may include case files, client contact sheets, telephone logs, progress files, and other related documents.

**Implementation:** This section of the proposal should address the applicant's ability to implement the project. Provide a narrative statement addressing the topics described below.

#### a. Agency Description

Describe the applicant's organization including size, composition, structure, primary mission, philosophy, range of services, and the role of the VB Program within the organization.

#### b. Operational Agreements (OAs)

The applicant needs to demonstrate their knowledge, ability and systems to proactively collaborate and cooperate with other service providers who serve the child victims. The applicant should also address its efforts to avoid service fragmentation and duplication of services.

List collaborating agencies and organizations with current, project related OAs. If the project includes OAs for more than one component, list them by component. **Do not** submit copies of the OAs with this application. Retain them on file for review by OES staff during site and/or monitoring visits.

- OAs must describe plans for the coordination of services; identify the individual/ agency providing services including when and how the parties began coordination efforts; the roles and responsibilities of each organization under the project; the resources and services each party will contribute to the project; and the types of resources and services already being provided by each party; and the period of time that the OAs will be in effect. A sample operational agreement is provided in the forms section of this RFA.
- The OA must also be effective for the current grant year, and be signed and dated by both the chief executive officers and/or directors of organizations.

A sample operational agreement is provided in the forms section of this RFA.

## **B. THE PROJECT BUDGET**

The purpose of the Project Budget is to demonstrate how the project will implement the proposed plan with the funds available through this program. Project costs must be directly related to the objectives and activities of the project. The budget must cover the entire grant period. In the budget, include **only** those items covered by grant funds, including match funds when applicable. Projects may supplement grant funds with funds from other sources. However, since all approved line items are subject to audit, applicants should not include in the project budget matching funds (if applicable) in excess of the required match. All budgets are subject to OES modifications and approval.

OES requires the applicant to develop a **line item** budget that will enable them to meet the intent and requirements of the program, ensure the successful implementation of the project, and be cost-effective. Failure of the applicant to include required items in the budget does not exclude responsibility to comply with those requirements during the implementation of the project. The applicant should refer to the *Grantee Handbook* at [www.oes.ca.gov](http://www.oes.ca.gov). Applicant can select "Plans and Publications, RFA/RFP Grantee Handbook" for additional information concerning OES budget policy or to determine if specific proposed expenses are allowable. Contact the person listed on page 1, subsection B of this RFA if you have additional budget questions.

### **1. The Budget Narrative**

Applicants are required to submit a narrative with the project budget. The narrative must be typed and placed in the proposal in front of the budget pages. In the narrative describe:

- How funds are allocated to minimize administrative costs and support direct services.
- How the project's proposed budget supports the stated objectives and activities in the project, including how project-funded staff duties and time commitments support the proposed objectives and activities.
- Proposed staff commitment/percentage of time to other efforts, in addition to this project.
- The necessity for subcontracts and any unusual expenditures.
- Mid-year salary range adjustments.

### **2. Specific Budget Categories**

There is a separate form in the Forms Section (Part III) for each of the following three budget categories:

- Personal Services – Salaries/Employee Benefits,
- Operating Expenses, and
- Equipment.

Each budget category requires line item detail that addresses the method of calculation and justification for the expense. Enter the amount of each line item in the right hand column of the Budget Category form. All charges must be clearly documented **and rounded off to the nearest whole dollar**. Enter the total amount of the budget category at the bottom of the form. If additional pages are needed, total only the last page of each budget category.

The bottom of the Equipment Category form contains a format for identifying the project total and fund distribution. This section must be completed and submitted even if there are no line items identified in the equipment category.

**a. Personal Services – Salaries/Employee Benefits (Form A303a):**

1) Salaries

Personal services include all services performed by staff who are directly employed by the applicant and must be identified by position and percentage of salaries. Sick leave, vacation, holidays, overtime, and shift differentials must be budgeted as salaries. If agency personnel have accrued sick leave or vacation time prior to the approval of grant funding, they may not take that time off using project funds.

All other persons are to be shown as consultants in the Operating Expenses Category supported by a memorandum of understanding (MOU), contract, or OA, which must be kept on file by the grantee and made available for review during an OES site visit, monitoring visit, or audit. In the case of grants being passed through a grantee to be operated by another agency, the staff from the second agency will be shown in the Operating Expenses Category. In either case, they may be salaried or hourly, full-time or part-time positions.

2) Benefits

Employee benefits must be identified by type and percentage of salaries. Applicants may use fixed percentages of salaries to calculate benefits. Budgeted benefits cannot exceed those already established by the applicant.

Employer contributions or expenses for social security, employee life and health insurance plans, unemployment insurance, and/or pension plans are allowable budget items. Other benefits, such as uniforms or California Bar Association dues, are allowable budget items if negotiated as a part of an employee benefit package.

A line item is required for each different position/classification, but not for each individual employee. If several people will be employed full-time or part-time in the same position/classification, provide the number of full-time equivalents (e.g., three half-time clerical personnel should be itemized as 1½ clerical positions).

**b. Operating Expenses (Form A303b):**

Operating expenses are defined as necessary expenditures exclusive of personnel salaries, benefits and equipment. Such expenses may include specific items directly charged to the project, and in some cases, an indirect cost allowance. The expenses must be grant-related (e.g., to further the program objectives as defined in the grant award) and be encumbered during the grant period.

The following items fall within this category: consultant services such as subcontractors who are not employed by the applicant, travel, office supplies, training materials, research forms, equipment maintenance, software equipment rental/lease, telephone, postage, printing, facility rental, vehicle maintenance, answering service fees, and other consumable items. Furniture and office equipment with an acquisition cost of less than \$1,000 per unit (including tax, installation, and freight) **and/or with a useful life of less than one year fall within this category.**

**c. Equipment (Form A303c):**

Equipment is defined as nonexpendable tangible personal property having **a useful life of more than one year and an acquisition cost of \$1,000** or more per unit (including tax, installation, and freight).

A line item is required for each different type of equipment, but not for each specific piece of equipment (e.g., three laser jet printers must be one line item, not three).

**C. THE APPLICATION APPENDIX**

The Application Appendix provides OES with additional information from the applicant to support components of the application. The following must be included:

- List of Operational Agreements,
- Project Service Area Information,
- Project Contact Information,
- Project Summary,
- Additional Signature Authorization,
- Programmatic Purchase Justification,
- WSIN Certification of Compliance,
- Sole Source Justification Information,
- Disbursement of Confidential Funds, and
- Informer Payee Receipt.

**GOVERNOR'S OFFICE OF EMERGENCY SERVICES  
CRIMINAL JUSTICE PROGRAMS DIVISION**

**VERTICAL PROSECUTION BLOCK PROGRAM  
REQUEST FOR APPLICATION**

**PART III – FORMS**

**CHECKLIST AND REQUIRED SEQUENCE**

This checklist is provided to assist the applicant in ensuring that a complete application is submitted to OES.

- ☐ APPLICATION COVER SHEET
  
- ☐ GRANT AWARD FACE SHEET – Signed by the official authorized to enter into Grant Award Agreement.
  
- ☐ CERTIFICATE OF ASSURANCE OF COMPLIANCE – See description under “Part IV: Additional Information, subsection B.2., Finalizing the Grant Award Agreement.”
  
- ☐ THE PROJECT NARRATIVE
  - Problem Statement
  - Plan and Implementation
  
- ☐ THE PROJECT BUDGET
  - The Budget Narrative
  - Budget Forms – Forms A303a, A303b, A303c
  
- ☐ THE APPLICATION APPENDIX
  - Sample Operational Agreement
  - Project Service Area Information
  - Project Contact Information
  - Project Summary
  - Additional Signature Authorization
  - Programmatic Purchase Justification
  - WSIN Certification of Compliance
  - Sole Source Justification Information
  - Disbursement of Confidential Funds
  - Informer Payee Receipt





**CRIMINAL JUSTICE PROGRAMS DIVISION  
GOVERNOR'S OFFICE OF EMERGENCY SERVICES**

P.O. BOX 419047  
RANCHO CORDOVA, CALIFORNIA 95741-9047  
**(916) 324-9112**  
FAX: 323-1756



**APPLICATION COVER SHEET**

**RFA PROCESS**

**VERTICAL PROSECUTION BLOCK PROGRAM RFA**

**Deliver to Drug Enforcement Section**

Submitted by:

(Place name, address, and phone number of applicant here.)

## GRANT AWARD FACE SHEET INSTRUCTIONS

1. **Administrative Agency**  
Enter the complete name of the unit of government applying for funding (e.g., Alameda County, City of Fresno), also referred to as the “grantee.”
2. **Implementing Agency**  
Enter the complete name of the agency responsible for the day-to-day operation of the grant (e.g., Sheriff, Police Department), and the contact person’s name, address, and phone number. Include an e-mail address, if you have one.
3. **Project Title**  
Enter the complete title of the project. Do not use acronyms. Do not exceed 60 characters, including spaces and punctuation.
4. **Project Director**  
Enter the name, title, mailing address, and telephone number of the individual ultimately responsible for the project. This information must be limited to four lines.
5. **Financial Officer**  
Enter the name, title, mailing address, and telephone number of the person who will be responsible for all fiscal matters relating to the project. This person must be someone other than the project director. The reimbursement check for this project will be mailed to the address shown for the financial officer. This information must be limited to four lines.
6. **Award Number**  
Leave blank (to be completed by OES).
7. **Grant Period**  
Enter beginning and ending dates of funding as specified in the grant application instructions.
8. **Federal Amount**  
If applicable, enter the amount of federal funds requested for the project. The amount must be consistent with the proposed budget. If not applicable, enter N/A.
9. **State Amount**  
If applicable, enter the amount of state funds requested for the project. If not applicable, enter N/A.
10. **Cash Match**  
If applicable, enter the amount of cash match. The amount must be consistent with the proposed budget. If not applicable, enter N/A.
11. **In-Kind Match**  
If applicable, enter the amount of in-kind match. The amount must be consistent with the proposed budget. If not applicable, enter N/A.
12. **Total Project Cost**  
Enter the sum of items 8, 9, 10, and 11. The amount must be consistent with the proposed budget.
13. **Official Authorized to Sign for Applicant/Grantee**  
Enter the signature, name, title, address, and telephone number of the official authorized to enter into the Grant Award Agreement for the city/county or community-based organization, as stated in the language between items 12 and 13 of the Grant Award Face Sheet (Form A301). **Provide an original signature of the authorized official in blue ink.**

**GOVERNOR'S OFFICE OF EMERGENCY SERVICES  
CRIMINAL JUSTICE PROGRAMS DIVISION**

**GRANT AWARD FACE SHEET (FORM A301)**

The Governor's Office of Emergency Services, hereafter designated OES, hereby makes a grant award of funds to the following

**Administrative Agency (1)** \_\_\_\_\_

hereafter designated Grantee, in the amount and for the purpose and duration set forth in this grant award.

**(2) Implementing Agency Name** \_\_\_\_\_

**Contact** \_\_\_\_\_ **Address** \_\_\_\_\_

**E-mail address** \_\_\_\_\_ **Telephone (     )** \_\_\_\_\_

<b>(3) Project Title</b> (60 characters maximum)	<b>(6) Award No.</b>
<b>(4) Project Director</b> (Name, Title, Address, Telephone) (four lines maximum)	<b>(7) Grant Period</b>
	<b>(8) Federal Amount</b>
	<b>(9) State Amount</b>
<b>(5) Financial Officer</b> (Name, Title, Address, Telephone) (four lines maximum)	<b>(10) Cash Match</b> "N/A."
	<b>(11) In-Kind Match</b> "N/A."
	<b>(12) Total Project Cost</b>

This grant award consists of this title page, the application for the grant which is attached and made a part hereof, and the Assurance of Compliance forms which are being submitted. I hereby certify that: (1) I am vested with authority to, and have the approval of the City/County Financial Officer, City Manager, or Governing Board Chair, enter into this grant award agreement; and (2) all funds received pursuant to this agreement will be spent exclusively on the purposes specified. The grant recipient signifies acceptance of this grant award and agrees to administer the grant project in accordance with the statute(s), the Program Guidelines, the *Grantee Handbook*, and the OES audit requirements, as stated in this RFP or RFA. The grant recipient further agrees to all legal conditions and terms incorporated by reference in this RFP or RFA.

<p style="text-align: center;"><b><u>FOR OES USE ONLY</u></b></p> <p>Item: _____</p> <p>Chapter: _____</p> <p>PCA No.: _____</p> <p>Components No.: _____</p> <p>Project No.: _____</p> <p>Amount: _____</p> <p>Split Fund: _____</p> <p>Split Encumber: _____</p> <p>Year: _____</p> <p>Fed. Cat. #: _____</p> <p>Match Requirement: _____</p> <p>Fund: _____</p> <p>Program: _____</p> <p>Region: _____</p>	<p><b>(13) Official Authorized to Sign for Applicant/Grant Recipient</b></p> <p>Signature: _____</p> <p>Name: _____</p> <p>Title: _____</p> <p>Address: _____</p> <p>Telephone: (     ) _____</p> <p>E-mail address: _____</p> <p>Date: _____</p> <hr/> <p>I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.</p> <hr/> <p>Fiscal Officer, _____ Date _____</p> <hr/> <p>Executive Director, _____ Date _____</p>
---	--

## CERTIFICATION OF ASSURANCE OF COMPLIANCE

I, \_\_\_\_\_, hereby certify that:  
(official authorized to sign grant award; same person as line 13 on Grant Award Face Sheet)

GRANTEE: \_\_\_\_\_

IMPLEMENTING AGENCY: \_\_\_\_\_

PROJECT TITLE: \_\_\_\_\_

is responsible for reviewing the *Grantee Handbook*<sup>1</sup> and adhering to all of the Grant Award Agreement requirements (state and/or federal) as directed by OES including, but not limited to, the following areas:

### I. **Equal Employment Opportunity – (*Grantee Handbook Section 2151*)**

It is the public policy of the State of California to promote equal employment opportunity by prohibiting discrimination or harassment in employment because of race, religious creed, color, national origin, ancestry, disability (mental and physical) including HIV and AIDS, medical condition (cancer and genetic characteristics), marital status, sex, sexual orientation, denial of family medical care leave, denial of pregnancy disability leave, or age (over 40). **OES-funded projects certify that they will comply with all state and federal requirements regarding equal employment opportunity, nondiscrimination and civil rights.**

Please provide the following information:

Affirmative Action Officer: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### II. **Drug-Free Workplace Act of 1990 – (*Grantee Handbook Section 2152*)**

The State of California requires that every person or organization awarded a grant or contract shall certify it will provide a drug free workplace.

### III. **California Environmental Quality Act (CEQA) – (*Grantee Handbook Section 2153*)**

The State of California requires all OES-funded projects to obtain written certification that the project is not impacting the environment negatively.

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<sup>1</sup> The *Grantee Handbook* can be obtained from [www.oes.ca.gov](http://www.oes.ca.gov). Applicant can select “Plans and Publications, RFA/RFP Grantee Handbook” to access the *Grantee Handbook*.

**IV. Lobbying – (*Grantee Handbook Section 2154*)**

OES grant funds, grant property, or grant funded positions shall not be used for any lobbying activities, including, but not limited to, being paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement.

**V. Debarment and Suspension – (*Grantee Handbook Section 2155*)**  
*(This applies to federally funded grants only.)*

OES-funded projects must certify that it and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of federal benefits by a state or federal court, or voluntarily excluded from covered transactions by any federal department of agency.

**VI. Proof of Authority from City Council/Governing Board**

The above-named organization (applicant) accepts responsibility for and will comply with the requirement to obtain written authorization from the city council/governing board in support of this program. The applicant agrees to provide all matching funds required for said project (including any amendment thereof) under the Program and the funding terms and conditions of OES, and that any cash match will be appropriated as required. It is agreed that any liability arising out of the performance of this Grant Award Agreement, including civil court actions for damages, shall be the responsibility of the grant recipient and the authorizing agency. The State of California and OES disclaim responsibility of any such liability. Furthermore, it is also agreed that grant funds received from OES shall not be used to supplant expenditures controlled by the city council/governing board.

The applicant is required to obtain written authorization from the city council/governing board that the official executing this agreement is, in fact, authorized to do so. The applicant is also required to maintain said written authorization on file and readily available upon demand.

All appropriate documentation must be maintained on file by the project and available for OES or public scrutiny upon request. Failure to comply with these requirements may result in suspension of payments under the grant or termination of the grant or both and the grantee may be ineligible for award of any future grants if the OES determines that any of the following has occurred: (1) the grantee has made false certification, or (2) violates the certification by failing to carry out the requirements as noted above.

### CERTIFICATION

I, the official named below, am the same individual authorized to sign the Grant Award Agreement [line 13 on Grant Award Face Sheet], and hereby swear that I am duly authorized legally to bind the contractor or grant recipient to the above described certification. I am fully aware that this certification, executed on the date and in the county below, is made under penalty of perjury under the laws of the State of California.

Authorized Official's Signature: \_\_\_\_\_

Authorized Official's Typed Name: \_\_\_\_\_

Authorized Official's Title: \_\_\_\_\_

Date Executed: \_\_\_\_\_

Federal ID Number: \_\_\_\_\_

Executed in the City/County of: \_\_\_\_\_

### AUTHORIZED BY:

- City/County Financial Officer
- City Manager
- Governing Board Chair

Signature: \_\_\_\_\_

Typed Name: \_\_\_\_\_

Title: \_\_\_\_\_

**THE PROJECT NARRATIVE  
GOES HERE**

No standard forms are provided for the Project Narrative.

See Instructions in Part II of this RFA for details.

**THE PROJECT BUDGET**  
**THE BUDGET NARRATIVE**  
**GOES HERE**

No standard forms are provided for the Budget Narrative.

See Instructions in Part II of this RFA for details.



BUDGET CATEGORY AND LINE ITEM DETAIL	
A. Personal Services – Salaries/Employee Benefits	COST
TOTAL	

Form A303a

BUDGET CATEGORY AND LINE ITEM DETAIL	
B. Operating Expenses	COST
<b>TOTAL</b>	

Form A303b



**THE APPLICATION APPENDIX**  
**GOES HERE**

See Instructions in Part II of this RFA for details.

## SAMPLE OPERATIONAL AGREEMENT

This Operational Agreement stands as evidence that the (applicant agency) and the (agency) intend to work together toward the mutual goal of providing maximum available assistance for crime victims residing in (jurisdiction). Both agencies believe that implementation of the (program) application, as described herein, will further this goal. To this end, each agency agrees to participate in the program, if selected for funding, by coordinating/providing the following services:

The (applicant agency) project will closely coordinate the following services with the (agency) through:

- Project staff being readily available to (agency) for service provision through (describe arrangements with the agency);
- Regularly scheduled meetings (how often) between (persons/positions) to discuss strategies, timetables and implementation of mandated services.

\* Specifically:

\* List specific activities that will be undertaken between the two agencies or other specifics of the agreement.

We, the undersigned, as authorized representatives of (applicant agency) and (agency), do hereby approve this document.

For \_\_\_\_\_

For \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

## **PROJECT SERVICE AREA INFORMATION**

1. COUNTY OR COUNTIES SERVED: Enter the name(s) of the county or counties served by the project. Put an asterisk where the principal office of the project is located.
  
2. U.S. CONGRESSIONAL DISTRICT(S): Enter the number(s) of the U.S. Congressional District(s) which the project serves. Put an asterisk for the district where the principal office of the project is located.
  
3. STATE ASSEMBLY DISTRICT(S): Enter the number(s) of the State Assembly District(s) which the project serves. Put an asterisk for the district where the principal office of the project is located.
  
4. STATE SENATE DISTRICT(S): Enter the number(s) of the State Senate District(s) which the project serves. Put an asterisk for the district where the principal office of the project is located.
  
5. POPULATION OF SERVICE AREA: Enter the total population of the service area served by the project.

## **PROJECT CONTACT INSTRUCTIONS**

1. Provide the name, title, address, telephone number, and e-mail address for the person having day-to-day responsibility for the project.
2. Provide the name, title, address, telephone number, and e-mail address for the person to whom the person listed in #1 is accountable.
3. Provide the name, title, address, telephone number, and e-mail address for the Chief Executive of the implementing agency.
4. Provide the name, title, address, telephone number, and e-mail address for the financial officer for the project.
5. Provide the name, title, address, telephone number, and e-mail address for the project director for the project.
6. Provide the name, title, address, telephone number, and e-mail address for the Chair of the Governing Body of the implementing agency.

## PROJECT CONTACT INFORMATION

Applicant: \_\_\_\_\_ Grant Number \_\_\_\_\_

Provide the name, title, address, telephone number, and e-mail address for the project contact persons named below. **If a section does not apply to your project, enter "N/A."**

1. The **person** having **day-to-day responsibility** for the project:

Name:	Title:	
Address:	City:	Zip:
Telephone Number: (    )	Fax Number: (    )	
E-Mail Address:		

2. The **person** to whom the person listed in **#1 is accountable**:

Name:	Title:	
Address:	City:	Zip:
Telephone Number: (    )	Fax Number: (    )	
E-Mail Address:		

3. The **executive director** of a nonprofit organization or the **chief executive officer** (e.g., chief of police, superintendent of schools) of the implementing agency:

Name:	Title:	
Address:	City:	Zip:
Telephone Number: (    )	Fax Number: (    )	
E-Mail Address:		

4. The **financial officer** for the project:

Name:	Title:	
Address:	City:	Zip:
Telephone Number: (    )	Fax Number: (    )	
E-Mail Address:		

5. The **project director** for the project:

Name:	Title:	
Address:	City:	Zip:
Telephone Number: (    )	Fax Number: (    )	
E-Mail Address:		

6. The **chair** of the **governing body** of the implementing agency: *(Provide address and telephone number other than that of the implementing agency.)*

Name:	Title:	
Address:	City:	Zip:
Telephone Number: (    )	Fax Number: (    )	
E-Mail Address:		



## PROJECT SUMMARY INSTRUCTIONS

All of the necessary project information must be placed on the form in the space allowed. **Additional pages may not be added.** This is a summary of the project narrative.

1. **PROJECT YEAR:** If the project is new, check new. If the project is continuing, check the box of the proposed year of the project (i.e., Year 2) or insert the year of operation.
2. **PROJECT TITLE:** Enter the complete title. The title **MUST** describe the focus of the project. Acronyms are not acceptable. Do not exceed 60 characters, including space and punctuation.
3. **GRANT PERIOD:** Enter the beginning and ending dates of funding as specified in the grant application.
4. **APPLICANT:** Enter the name and complete address of the organization that is applying for the grant.
5. **FUNDS REQUESTED:** Enter the amount of grant funds requested. This must be the same amount used on the budget pages and on the application cover sheet.
6. **IMPLEMENTING AGENCY:** Enter the agency or organization designated on the Grant Award Face Sheet as the programmatic recipient of the grant funds who will accomplish the planned objectives and program goals.
7. **PROGRAM DESCRIPTION:** Provide a description of the specific area of service which OES is authorized to fund based upon state or federal legislation.
8. **PROBLEM STATEMENT:** Describe the problem the project will address. Support the problem with data such as number of offenses, description of the target area, and local needs.
9. **OBJECTIVES:** Include the quantifiable measurements which define a course of action in order to accomplish the program goals.

### **PROGRAM SPECIFIC CATEGORIES**

10. **ACTIVITIES:** Describe activities you will perform to accomplish each objective (quantify where possible).
11. **CATEGORY:** Check the appropriate category.
12. **PROGRAM AREA:** Check appropriate program area.
13. **EVALUATION:** Describe how project performance will be measured. Note who will conduct the evaluation (e.g., project staff, government personnel, or outside consultants).
14. **NUMBER OF CLIENTS TO BE SERVED:** Enter the number of clients.
15. **PROJECTED BUDGET:** List all noted budget items. Be specific in breakdown of grant funds and all other budget sources.
16. **RESPONSIBLE OFFICIAL:** The legally responsible official for the organization should sign and date this document. The official's name and title should be typed in the space provided.

## PROJECT SUMMARY

**1. PROJECT YEAR**

New

Year 2

Year 3

Other \_\_\_\_\_

**2. PROJECT TITLE****3. GRANT PERIOD**

\_\_\_\_\_ to

\_\_\_\_\_

**4. APPLICANT**

Name:

Phone: (    )

Address:

Fax #: (    )

**5. FUNDS REQUESTED**

\$ \_\_\_\_\_

**6. IMPLEMENTING AGENCY**

Name:

Phone: (    )

Fax #: (    )

Address:

**7. PROGRAM DESCRIPTION****8. PROBLEM STATEMENT****9. OBJECTIVES**

<b>10. ACTIVITIES</b>    	<b>11. CATEGORY</b> <div style="text-align: center;"> — — — — </div>																																
	<b>12. PROGRAM AREA</b> <div style="text-align: center;"> — — — — </div>																																
<b>13. EVALUATION</b>    	<b>14. NUMBER OF CLIENTS TO BE SERVED</b>  <div style="border-bottom: 1px solid black; height: 20px; margin-top: 10px;"></div>																																
<b>15. PROJECTED BUDGET</b>																																	
<div style="display: flex; align-items: flex-start;"> <div style="flex: 1;"> Funds Requested .....   Other Grant Funds .....  Other Sources (list in-kind, fees, etc.) .....   <div style="border-bottom: 1px solid black; height: 15px; margin-top: 10px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div> </div> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr style="background-color: #d3d3d3;"> <th style="padding: 5px;">Personnel Services</th> <th style="padding: 5px;">Operating Expenses</th> <th style="padding: 5px;">Equipment</th> <th style="padding: 5px;">TOTAL</th> </tr> </thead> <tbody> <tr><td style="height: 30px;"></td><td></td><td></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td><td></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td><td></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td><td></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td><td></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td><td></td><td></td></tr> <tr><td style="height: 30px;"></td><td></td><td></td><td></td></tr> </tbody> </table> </div>	Personnel Services	Operating Expenses	Equipment	TOTAL																													
Personnel Services	Operating Expenses	Equipment	TOTAL																														
<b>16. NAME OF RESPONSIBLE OFFICIAL</b>  <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div>Signature: _____</div> <div>Date: _____</div> </div> <div style="margin-top: 10px;"> Typed Name: _____ </div> <div style="margin-top: 10px;"> Title: _____ </div>																																	

## **ADDITIONAL SIGNATURE AUTHORIZATION INSTRUCTIONS**

Applicant may request signature authority in addition to the designated Project Director and/or Financial Officer by completing an Additional Signature Authority form and submitting it with the Grant Award Forms package. Space is provided for the addition of up to five (5) additional authorizations for the Project Director or Financial Officer.

No single individual may be authorized to sign for both the Project Director and the Financial Officer. **By signing the bottom of this form, the Project Director and/or Financial Officer authorize the person(s) identified on the form to act on their behalf on all grant-related matters.**

## ADDITIONAL SIGNATURE AUTHORIZATION

Grant Award #: \_\_\_\_\_

Applicant: \_\_\_\_\_

Project Title: \_\_\_\_\_

Grant Period: \_\_\_\_\_ to \_\_\_\_\_

The following persons are authorized to sign for:

### Project Director

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

### Financial Officer

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name

---

### Approved By:

Project Director: \_\_\_\_\_

\_\_\_\_\_  
Date

Financial Officer: \_\_\_\_\_

\_\_\_\_\_  
Date

Regional/Local  
Planning Director: \_\_\_\_\_

\_\_\_\_\_  
Date

**GOVERNOR'S OFFICE OF EMERGENCY SERVICES  
CRIMINAL JUSTICE PROGRAMS DIVISION**

**PROGRAMMATIC PURCHASE JUSTIFICATION**

As stated in the *Grantee Handbook*, approval for purchases of computers and automated equipment is contingent on the project's ability to demonstrate cost effective, project-related need. This is best demonstrated by clearly relating each computer system or component to the grant objectives and activities.

- A. In narrative form, please answer the following questions. Attach as many pages as necessary to fully answer each question.
1. What is your agency's purpose for the proposed system? Include a description of the items to be purchased and how they will be used. Also, explain how the proposed equipment and/or software will enhance the project's ability to achieve the objectives/activities of the project as specified in the Grant Award Agreement.
- B. If the request is for hardware and software in which the total costs exceed \$10,000, answer the following questions:
1. Describe the proposed design of your system and indicate whether this is a new system or an addition/enhancement of an existing one. In your description please be specific as to type and location of hardware/software and how the system will be operated and maintained.
  2. Will the proposed system design meet not only your current, but future needs? Describe in detail.
  3. Does the proposed system integrate with others within the agency? Explain both yes and no responses in detail.
  4. Do you plan on integrating this system with existing city, county, regional or statewide networks? Explain both yes or no responses in detail.
  5. For criminal justice agencies, does the proposed system meet the minimum requirements of the Statewide Integrated Narcotics System (SINS)? Contact OES for additional information regarding SINS requirements.
  6. Does the proposed system include intelligence data subject to 28 CFR Part 23 (2003)? Contact WSIN regarding these requirements and have them sign the certification of compliance.

## WESTERN STATES INFORMATION NETWORK (WSIN)

### CRIMINAL INTELLIGENCE SYSTEM CERTIFICATION OF COMPLIANCE

This is to certify that I, the Executive Director (*or designee*) for WSIN, have conferred with the applicant (*name of grantee*) \_\_\_\_\_ in the design and implementation of this computer system and that it is compatible with the personal computer specifications of the Statewide Integrated Narcotics System.

I further certify that this project is in compliance with the applicable standards for automated criminal intelligence systems as contained in 28 CFR Part 23 (2003).

\_\_\_\_\_  
Executive Director, WSIN

\_\_\_\_\_  
Date

---

Agency Implementing the System \_\_\_\_\_

Designated Contact Person \_\_\_\_\_  
(Name) (Phone Number)

Project Location \_\_\_\_\_

**(Applicable to certain federal funds only)**

**SOLE/SINGLE SOURCE JUSTIFICATION  
CONTRACTS FOR SERVICES**

**CHECKLIST**

Has the applicant/grantee met the following requirements of the *Grantee Handbook*:

**Section 4510**

**Yes**

**No**

Do conditions exist that require a sole/single-source contract?

☐☐

**Section 4521**

Is a brief description of the program or project included?

☐☐

**Section 4522**

Was it necessary to contract noncompetitively?

☐☐

Did the contractor submit his/her qualifications?

☐☐

Is the reasonableness of the cost justified?

☐☐

Were cost comparisons made with differences noted for similar services?

☐☐

**Section 4523**

Is an explanation provided for the uniqueness of the contract?

☐☐

**Section 4524**

Are there time constraints impacting the project?

☐☐

Is a justification provided regarding the need for contract?

☐☐

Were comparisons made to identify the time required for another contractor to reach the same level of competence?

☐☐



# SOLE SOURCE JUSTIFICATION CONTRACTS FOR GOODS

## CHECKLIST

Has the applicant/grantee met the following requirements of the *Grantee Handbook*:

### **Section 3510**

**Yes**

**No**

Do conditions exist that require a sole/single-source contract?

☐☐

### **Section 3520**

Is a brief description of the program or project included?

☐☐

Was it necessary to contract noncompetitively?

☐☐

Did the contractor submit his/her qualifications?

☐☐

Is the reasonableness of the cost justified?

☐☐

Were cost comparisons made with differences noted for similar services?

☐☐

Is an explanation provided for the uniqueness of the contract?

☐☐

Are there time constraints impacting the project?

☐☐

Is a justification provided regarding the need for contract?

☐☐

Were comparisons made to identify the time required for another contractor to reach the same level of competence?

☐☐

**SAMPLE CERTIFICATION  
DISBURSEMENT OF CONFIDENTIAL FUNDS**

This is to certify that I have read, understand, and agree to abide by all of the conditions for confidential expenditures as set forth in the OES guidelines.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Project Director

**SAMPLE RECEIPT FROM  
INFORMER PAYEE RECEIPT**

For and in consideration of the sale and delivery to the State, County or City of \_\_\_\_\_  
of information or evidence identified as follows: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby acknowledge receipt of \$ \_\_\_\_\_  
\_\_\_\_\_

(numerical and word amount entered by payee) paid to me by the State, County, City of \_\_\_\_\_  
on \_\_\_\_\_ (date).

Payee: \_\_\_\_\_  
(Signature)

Case Agent/Officer: \_\_\_\_\_  
(Signature)

Witness: \_\_\_\_\_  
(Signature)

Case or Reference: \_\_\_\_\_

Form 652

**WAIVER OF FY 2004/05  
VERTICAL PROSECUTION BLOCK PROGRAM FUNDING**

The Office of the District Attorney of \_\_\_\_\_ County, being fully aware of the availability of Vertical Prosecution Block Program funds for FY 2004/05, has decided to decline those funds.

Original Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Typed Name and Title: \_\_\_\_\_

<b>County District Attorney</b>	<b>VB Award FY 2004-2005</b>
Alameda	\$477,184
Alpine	\$22,054
Amador	\$101,972
Butte	\$62,368
Calaveras	\$42,715
Colusa	\$42,715
Contra Costa	\$279,523
Del Norte	\$42,715
El Dorado	\$62,368
Fresno	\$160,178
Glenn	\$42,715
Humboldt	\$62,368
Imperial	\$115,199
Inyo	\$42,715
Kern	\$204,412
Kings	\$62,368
Lake	\$176,043
Lassen	\$42,715
Los Angeles	\$678,017
Madera	\$42,715
Marin	\$42,715
Mariposa	\$22,221
Mendocino	\$42,715
Merced	\$112,531
Modoc	\$22,221
Mono	\$22,221
Monterey	\$198,188

<b>County District Attorney</b>	<b>VB Award FY 2004-2005</b>
<b>Napa</b>	<b>\$101,972</b>
<b>Nevada</b>	<b>\$42,715</b>
<b>Orange</b>	<b>\$390,250</b>
<b>Placer</b>	<b>\$136,439</b>
<b>Plumas</b>	<b>\$42,715</b>
<b>Riverside</b>	<b>\$305,834</b>
<b>Sacramento</b>	<b>\$314,877</b>
<b>San Benito</b>	<b>\$42,715</b>
<b>San Bernardino</b>	<b>\$418,362</b>
<b>San Diego</b>	<b>\$342,470</b>
<b>San Francisco</b>	<b>\$290,562</b>
<b>San Joaquin</b>	<b>\$350,888</b>
<b>San Luis Obispo</b>	<b>\$62,368</b>
<b>San Mateo</b>	<b>\$62,368</b>
<b>Santa Barbara</b>	<b>\$62,368</b>
<b>Santa Clara</b>	<b>\$180,925</b>
<b>Santa Cruz</b>	<b>\$42,715</b>
<b>Shasta</b>	<b>\$174,151</b>
<b>Sierra</b>	<b>\$22,221</b>
<b>Siskiyou</b>	<b>\$42,715</b>
<b>Solano</b>	<b>\$184,385</b>
<b>Sonoma</b>	<b>\$182,555</b>
<b>Stanislaus</b>	<b>\$253,965</b>
<b>Sutter</b>	<b>\$42,715</b>
<b>Tehama</b>	<b>\$42,715</b>
<b>Trinity</b>	<b>\$155,550</b>
<b>Tulare</b>	<b>\$265,597</b>
<b>Tuolumne</b>	<b>\$42,715</b>
<b>Ventura</b>	<b>\$62,368</b>

<b>County District Attorney</b>	<b>VB Award FY 2004-2005</b>
Yolo	\$174,215
Yuba	\$113,724
<b><i>TOTAL</i></b>	<b><i>\$8,176,000</i></b>